PTO/SB/17 (01-06)

<u>,,,</u>	Approved for use through 7/31/2006. OMB 0651-0032 U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE Under the Paperwork Reduction Act of 1995, no person are required to respond to a collection of information unless it displays a valid OMB control number								
£7				Complete if Known					
Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).				Application Number 10/026,596-0					
FEE TRANSMITTAL						December 20, 2001			
For FY 2006						Hung-Liang Chiu			
				Examiner Name J. L.		L. Williams			
Applicant claims small entity status. See 37 CFR 1.27				Art Unit 2		2137			
TOTAL AMOUNT OF PAYMENT (\$) 1,240.00			Attorney D	Attorney Docket No. 56783(71987					
METHOD OF PAYMENT (check all that apply)									
Check Credit Card Money Order None Other (please identify):									
x Deposit Account Deposit Account Number: 04-1105 Deposit Account Name: Edwards Angell Palmer & Dodge LLP									
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)									
x Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee									
Charge any additional fee(s) or underpayment of x Credit any overpayments fee(s) under 37 CFR 1.16 and 1.17									
FEE CALCULATION (All the fees below are due upon filing or may be subject to a surcharge.)									
1. BASIC FILING, SEARCH, AND EXAMINATION FEES									
İ	, FI		EARCH FEE		INATION FEES				
Application T	ype Fee (\$	Small Entity Fee (\$) Fee	<u>Small E</u> (\$) Fee (		Small Entity ) Fee (\$)	Fees F	Paid (\$)		
Utility	300	150 50	0 250	200	100				
Design	200	100 10	0 50	130	65	_			
Plant	200	100 30	0 150	160	80				
Reissue	300	150 50	0 250	600	300				
Provisional	200	100	0 (	0	0				
2. EXCESS CLAIM FEES Small Entity									
Fee Description Fee (\$)									
Each claim over 20 (including Reissues)						50	25		
Each independent claim over 3 (including Reissues)  Multiple dependent claims						200	100		
1 ' '		- (A)	Daid (6)	360 180 sid (\$) Multiple Dependent Claims					
Total Claims	Total Claims						Fee Paid (\$)		
-= x = Fee (\$) Fee Paid (\$)  HP = highest numer of total claims paid for, if greater than 20.									
Indep. Claims Extra Claims Fee (\$) Fee Paid (\$)									
x									
HP = highest numer of independent claims paid for, if greater than 3.									
3. APPLICATION SIZE FEE									
If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50									
sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).									
<u>Total Sheet</u>	Total Sheets Extra Sheets Number of each additional 50 or fraction thereof Fee (\$) Fee Paid (\$)								
- 100 = /50 (round up to a whole number) x =									
4. OTHER FEE(S)  Non-English Specification, \$130 fee (no small entity discount)									
Other (e.g., late filing surcharge): 1252 Extension for response within second month 450.00									
1801 Request for continued examination (RCE) (see 37 790.00									
SUBMITTED BY ,									
Signature	At 1		Registration ( (Attorney/Ager		Telephone	hone (617) 439-4444			
Name (Print/Type) Steven M. Vensen Date					Date	April 10, 2006			

Application No. (if known): 10/026,596

Attorney Docket No.: 56783(71987)

## **Certificate of Express Mailing Under 37 CFR 1.10**

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MS RCE Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

on <u>April 10, 2006</u> Date

Kather	- M. Drum				
Signa	ature				
Kathleen Drury					
Typed or printed name of person signing Certificate					
Registration Number, if applicable	Telephone Number				

Note: Each paper must have its own certificate of mailing, or this certificate must identify each submitted paper.

Fee Transmittal (1 page)

Two Month Request for Extension of Time Under 37 CFR 1.136(a) (2

pages)

Request for Continued Examination Transmittal (1 page)

Amendment dated 2.9.06

Charge \$1,240.00 to deposit account 04-1105